



National  
Aeronautics and  
Space  
Administration

# Authorization - Change of Station

1. AUTHORIZATION NO.

TYPE OF MOVE:



FDS

PCS

TCS

SES LAST MOVE HOME

2. NAME OF EMPLOYEE

3. SOCIAL SECURITY NO.

4. MARITAL STATUS

5. LOCATION OF OLD DUTY STATION/NASA CENTER

6. LOCATION OF NEW DUTY STATION/NASA CENTER

7. ENTER ON DUTY DATE

8. DATE SERVICE AGREEMENT SIGNED

9. TRAVEL DATES (Including house hunting, if applicable)

10. PER DIEM

a. EMPLOYEE

b. IMMEDIATE FAMILY

11. MISCELLANEOUS EXPENSES

a. WITH FAMILY

b. WITHOUT FAMILY

## 12. TRANSPORTATION

a. FAMILY WILL TRAVEL

(1) WITH EMPLOYEE

(2) SEPARATELY (Complete  
12b, if checked)

b. REASON FOR SEPARATE TRAVEL

c. TRAVEL MODE

COMMERCIAL AIR

☐ AUTO AT \$0. \_\_\_\_\_ PER MILE (Travel time limited to the average of 300 miles per day or the actual time, whichever is less)

OTHER (Specify)

## 13. HOUSE HUNTING TRIP

a. AUTHORIZED

— YES (Complete 14b, c,  
and d, if checked)

☐ NO

b. AUTHORIZED FOR

☐ EMPLOYEE

SPOUSE

EMPLOYEE AND SPOUSE

c. NUMBER OF DAYS  
ALLOWED

ACTUAL \_\_\_\_\_

— FIXED 10 DAYS

d. CAR RENTAL IS  
AUTHORIZED

YES

☐ NO

## 14. MOVEMENT AND STORAGE OF HOUSEHOLD GOODS

a. TRANSPORTATION AUTHORIZED

— YES

NO

b. METHOD OF SHIPMENT

COMMUTED RATE

GOVERNMENT BILL OF LADING (Attach cost comparison)

c. SHIPPING WEIGHT

d. TEMPORARY STORAGE

AUTHORIZED

NUMBER OF DAYS \_\_\_\_\_

e. SHIPMENT OF POV AUTHORIZED (See attached POV  
cost comparison)

— YES

☐ NO

## 15. TEMPORARY QUARTERS

AUTHORIZED

YES

☐ NO

☐ ACTUAL NTE 60 DAYS

NUMBER OF DAYS \_\_\_\_\_

FIXED NTE 30 DAYS

## 16. REAL ESTATE EXPENSES ANTICIPATED

a. FROM SALE OF OLD RESIDENCE



b. PURCHASE OF NEW RESIDENCE

c. UNEXPIRED LEASE

d. RELOCATION SERVICES

e. PROPERTY MANAGEMENT SERVICES

f. NOT APPLICABLE

**17. RELOCATION INCOME TAX ALLOWANCE**

\_\_\_ a. EMPLOYEE INCOME ONLY

b. EMPLOYEE AND SPOUSE INCOME


**CONDITION: THE TRAVEL AND RELOCATION ALLOWANCES AUTHORIZED ARE IN THE INTEREST AND TO THE ADVANTAGE OF THE GOVERNMENT, AND THE CHANGE OF STATION IS NOT MADE PRIMARILY FOR THE CONVENIENCE OR BENEFIT OF THE EMPLOYEE OR AT HIS OR HER REQUEST. NECESSARY EXPENSES MAY BE INCURRED IN ACCORDANCE WITH PROVISIONS OF APPLICABLE FINANCIAL LAWS AND NASA REGULATIONS.**

18. TYPED NAME AND TITLE OF REQUESTER	19. SIGNATURE	20. DATE
21. TYPED NAME AND TITLE OF AUTHORIZING OFFICIAL	22. SIGNATURE	23. DATE

**24. REMARKS****24a. NOTES (Information to be forwarded to Central Travel Office (CTO))**

<input type="checkbox"/> NASA FORM 1449 ATTACHED	<input type="checkbox"/> BINDING DECISION FORM ATTACHED
<input type="checkbox"/> COST COMPARISONS ATTACHED	EMPLOYEE GIVEN HELPFUL HINTS (For more info, refer to CTO Home page)

**25. ACCOUNTING INFORMATION****ACCOUNTING & APPROPRIATION DATA:**

DESCRIPTION	OBJECT CLASS	AMOUNT
a. PER DIEM		
b. HOUSE HUNTING TRIP		
c. TRANSPORTATION		
d. MISCELLANEOUS		
e. TEMPORARY QUARTERS		
f. REAL ESTATE		
<input type="checkbox"/> PURCHASE <input type="checkbox"/> SALE		
PROPERTY MANAGEMENT		
RELOCATION SERVICES		
g. HOUSEHOLD GOODS/POV SHIPMENT/STORAGE		
h. RELOCATION INCOME TAX ALLOWANCE		
i. ACCOUNTING CLASSIFICATION	<b>TOTAL</b> 	

CERTIFICATION OF FUND AVAILABILITY (Signature and date)